08/492,943



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| SERIAL NUMBER | FILING DATE | FIRST NAMED APPLICANT | | ATTORNEY DOCKETT NO. |
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| 08/49 | 92,943 06/ | 21/95 NAUGLE | R | SC08445SP1 |
| | B3M1/0804 | | EXAMINER | |
| | NT B INGRAS OLA INC | 51A | GECK I | L,M |
| | | PERTY DEPARTMENT | ART UNIT | PAPER NUMBER |
| | OX 10219 | | 2302 | 14 |
| SCOTT | SDALE AZ 85 | 271-0219 | DATE MAILED: | // 08/04/97 |
| | | EXAMINER INTERVIEW SUMMARY REC | | 00/04/9/ |
| VI participants (applicant | t, applicant's representa | ttive, PTO personnel): | | |
| 1) Mehmet | Gechil | (3) | | |
| 2) Robert | Atkins | . (4) | | |
| | 7/19/97 | | | |
| Date of interview | 7 Pamanal (2000) to 15 | | | |
| | | en to applicant applicant's representative). | | |
| xhibit shown or demons | stration conducted: ' | Yes No. If yes, brief description: | | |
| | | | | |
| Claims discussed: | discussed:/. S | Patet No: 5, 557, 7 | 36 | |
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| iterney to ate i.e. pling do und allo reg bade and surreling de | - above groor to and enable wested better | amendment joxing problems | at or before cation, App | in the affidouit |
| A fuller description, if neattached. Also, where no | cessary, and a copy of copy of the amendme | the amendments, if available, which the examiner ago nts which would render the claims allowable is availal | reed would render the o | daims allowable must be must be attached.) |
| | | le a separate record of the substance of the interview | | · |
| VAIVED AND MUST INC | CLUDE THE SUBSTAN | to indicate to the contrary, A FORMAL WRITTEN RES CE OF THE INTERVIEW (e.g., items 1-7 on the reve liven one month from this interview date to provide a s | rse side of this form). | if a response to the last Office |
| requirements tha | at may be present in the ements of the last Office | y above (including any attachments) reflects a complete last Office action, and since the claims are now allower action. Applicant is not relieved from providing a se | wable, this completed for | orm is considered to fulfill the |
| TOL-413 (REV. 2 -93) | | Examiner's S | ignature | pous |
| 10L-413 (NEV. 2-93) | ORIGINAL F | OR INSERTION IN RIGHT HAND FLAP OF FIL | ~ | |
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